

# REQUEST FOR APPLICATIONS CHERP Competitive Pilot Project Program Fiscal Year 2020 Submission Deadline – COB Wednesday, May 15, 2019

#### **OVERVIEW**

The Center for Health Equity Research and Promotion (CHERP), a VA Health Services Research & Development (HSR&D) Center of Innovation, invites VISN4 investigators to apply for up to \$25,000 in pilot project support during VA fiscal year (FY) 2020. Projects must be of a reasonable size and scope to be completed with the funds available and within the 1-year time frame (October 1, 2019-September 30, 2020). The deadline for submission of completed applications is *May 15, 2019*. Funding decisions will be announced in July.

#### **FOCUSED AREAS OF INTEREST**

Competitive pilot applications will align with CHERP's primary focus on improving the quality and equity of health and health care for vulnerable Veteran populations and/or our secondary focus on improving the quality, equity, safety, and value of clinical therapeutics.

CHERP is also interested in other innovative projects outside these focus areas that address current VA or HSR&D priorities (i.e., access, suicide prevention, and pain/opioids). *For projects where health equity is not the primary focus*, secondary aims or exploratory analyses evaluating differences between subgroups of vulnerable and non-vulnerable Veteran populations are strongly encouraged.

- 1. Improving the Quality and Equity of Care for Vulnerable Veteran Populations. CHERP's primary focus on improving health and health care for vulnerable populations targets the following groups identified in Healthy People 2020 or designated for special attention by VA: (1) racial and ethnic minorities; (2) women; (3) people experiencing homelessness or housing instability; (4) individuals with diminished autonomy or limited life expectancy; (5) those with serious mental illness, traumatic brain injury, post-traumatic stress disorder, or stigmatizing or disabling medical conditions; (6) people who have experienced military sexual trauma or intimate partner violence; (7) individuals disadvantaged due to geographic residence; (8) specific military cohorts; and (9) sexual orientation or gender identity minorities.
  - CHERP is increasingly interested in projects that go beyond identification and patient- and provider-level determinants of health disparities, to focus on system-level determinants of disparities and factors that fall outside the healthcare system and involve personal behaviors, social and community influences, and environmental or structural factors, such as housing, living conditions, and access to essential non-medical services (i.e., social determinants of health).
  - CHERP is also interested in projects that evaluate the effectiveness, safety, and cost of behavioral, technology-driven, community-based, and other interventions to improve health and health care for vulnerable populations; as well as projects focused on developing and evaluating strategies for implementation of evidence-based interventions to improve health and health care for vulnerable populations in real world settings.
- 2. Improving the Quality, Equity, Safety, and Value of Clinical Therapeutics. Appropriate use of medications, devices, and procedures improves medical outcomes and plays a central role in the management of acute and chronic illness; inappropriate use may lead to patient harm or low-value treatment. The development of high-cost clinical therapeutics, disparities in their utilization, safety issues, and evolving models of health care delivery pose ongoing challenges that warrant investigation to support VA as a learning health care system.

CHERP is interested in projects addressing and intervening in high priority topics in clinical therapeutics, including medication adherence; medication de-prescribing; use of genomics to personalize medication therapy; and appropriate and equitable use of medications, devices, and procedures. CHERP is also interested in the effects of receiving care outside VA through other forms of health insurance (e.g., Medicare, Medicaid) or VA Community Care on the usage patterns, safety, value, and equity of clinical therapeutics used by enrolled Veterans.

#### ADDITIONAL CRITERIA FOR COMPETITIVE PROJECTS

- 1. Inform the development of a highly competitive VA HSR&D application. To be successful in achieving this goal, investigators are encouraged to align their project focus with CHERP's strategic goals (CHERP Homepage), VA HSR&D priority areas (HSR&D Major Priority Domains and High-Priority Research Topics) and/or VA's strategic plan (VA 2018-2024 Strategic Plan) or ongoing transformation (MISSION Act).
  HSR&D is particularly interested in research that addresses novel health services methods focused on priority areas affecting Veterans, including: suicide prevention; access to care; mental health; women's health; health care value; primary care practice and management of complex chronic diseases; disability; opioid use disorder and pain treatment; long-term care, caregiver support, and aging; health care informatics; health equity; quality and safety of health care; population health and whole health; and virtual care. In addition, VA priority conditions currently include: suicide prevention, Gulf War illness, post-traumatic stress disorder, and traumatic brain injury. HSR&D is also interested in research addressing ongoing VA transformation through the MISSION Act (VA Maintaining Systems & Strengthening Integrated Outside Networks) with a focus on community care program implementation.
- 2. Involve one or more VA health system and/or community partners to maximize the relevance and impact of the proposed work. These partnerships ensure the relevance of CHERP pilot projects to the VA health care system and the communities impacted by the work; enable access to data, study populations, and resources; and facilitate rapid translation of evidence into practice and policy. Examples of potential VA health system partners include local VA Medical Center and VISN 4 clinical and administrative leaders; the Office of Health Equity; Office of Rural Health; Women's Health Services, Center for Medication Safety; Pharmacy Benefits Management; Office of Reporting, Analytics, Performance, Improvement, Deployment; National Center on Homelessness Among Veterans; and the Office of Patient Care Services. Examples of potential community partners include Veterans Service Organizations (e.g., American Legion, Disabled American Veterans, Paralyzed Veterans of America, Veterans of Foreign Wars), the Commonwealth of Pennsylvania, RAND Corporation, and local health care organizations (e.g., UPMC Center for High-Value Health Care, Penn Medicine Center for Health Care Innovation and Nudge Unit).
- 3. Incorporate VA stakeholder (e.g., Veteran, caregiver, provider) input across the project continuum, from conception to dissemination. Stakeholder engagement in development of project ideas, stakeholder-centered aims and outcomes, recruitment methods, data collection instruments, and dissemination strategies improves the quality, relevance, and value of CHERP's work. Pilot applications should reflect or describe methods for incorporating stakeholder input in the development and/or execution of the project. If desired, Drs. Kelly Burkitt (kelly.burkitt@va.gov) and Kimberly "Max" Brown (kimberly.brown6@va.gov) will facilitate investigator access to established Veterans Community Advisory Boards at the Pittsburgh and Philadelphia VA Medical Centers and support investigators in convening project-specific stakeholder advisory boards.

#### **ELIGIBLE APPLICANTS**

This funding mechanism is designed to advance the careers of junior scientists and enable senior scientists to pursue new areas of inquiry of high priority to CHERP, HSR&D, and VA.

Applications will be accepted from doctoral-level clinician and non-clinician investigators located within VISN 4. More specifically:

- Interested applicants must either have >5/8<sup>th</sup> VA support or include a CHERP core investigator as a Co-Principal Investigator. For assistance in establishing such collaborations, please contact Kelly Burkitt, PhD (412-360-2202 or <a href="kelly.burkitt@va.gov">kelly.burkitt@va.gov</a>) in Pittsburgh or Kimberly "Max" Brown, PhD (215-823-5800 x6248 or <a href="kelly.brown6@va.gov">kimberly.brown6@va.gov</a>) in Philadelphia.
- Principal Investigators without prior independent research support (e.g., PI on VA Merit Review/
  Investigator-Initiated Research Award or NIH/AHRQ R01 grant or equivalent) are required to identify a
  project mentor and submit a letter of commitment from the mentor detailing his/her role in the proposed
  project.
- VA postdoctoral fellows are eligible to apply for funding as a Principal Investigator provided there is an established mentorship with a CHERP core investigator.

#### **BUDGET**

Proposals with budgets up to \$25,000 will be accepted. Budgets may cover VA salary support for non-clinical (i.e., non-Title 38) Principal Investigators, co-investigators, and staff including coordinators, assistants, data managers, and biostatisticians. In developing the budget, investigators should consider all expenses for the proposed work, including costs of instrument development, data collection, database development, data management, computer programming, and statistical analyses, if required. Funds are not available for salary support for fellows or graduate students, travel, tuition, publication costs, computer hardware or software, or physical plant infrastructure.

Applicants are encouraged to utilize the CHERP Biostatistics and Informatics Core (BIC) for the programming, data acquisition, data management, and statistical services and the CHERP Qualitative Methods Core for qualitative expertise required by the project. Expenditures will be audited by CHERP leadership to ensure that spending is consistent with approved budgets.

Awarded funds not expended by September 30, 2020 will be swept by the VA Medical Center and lost to the program. For this reason, investigators who are unable implement a spending plan that fully obligates the funds awarded may be at risk for re-allocation of awarded funds by CHERP leadership.

- All budgets must undergo local CHERP review prior to submission. Please develop the budget and budget justification with either Kimberly Hansen, MA, CHERP Program Analyst (412-360-2219 or <a href="mailto:kimberly.hansen1@va.gov">kimberly.hansen1@va.gov</a>) in Pittsburgh or Kimberly "Max" Brown, PhD (215-823-5800 x6248 or <a href="mailto:kimberly.brown6@va.gov">kimberly.brown6@va.gov</a>) in Philadelphia.
- If your project requires more than \$25,000, you must secure approval from the CHERP Pilot Program
  Committee prior to submission. Contact Kelly Burkitt, PhD (412-360-2202 or kelly.burkitt@va.gov) to
  initiate this process.
- Please note that awardees may be asked to modify budget requests based on recommendations of the Review Committee.

# **GUIDELINES/CHECKLIST FOR PROPOSAL PREPARATION**

The completed PDF application should follow the format outlined below:

- 1. CHERP Competitive Pilot Project Program Application Cover Page (attached)
- 2. **Project Plan.** The Project Plan (Sections A-F) should include information sufficient to evaluate the project independent of any other document. The Project Plan must not exceed *5 single-spaced pages*. *Margins must be ½ inch and the type must be at least 11-point in size*. All tables, graphs, figures, diagrams, and charts must be included within the 5-page limit. Applications that exceed the 5-page limit or do not conform to the type size limitations will be returned without review.
  - **A.** *Specific Aims and Significance*. List the broad, long-term objective(s) and the specific aims for the proposed pilot project. If appropriate, state the hypotheses to be tested.
    - State concisely the importance, health relevance, and innovation of the pilot project by relating the specific aims to the broad, long-term objectives
    - Explicitly describe the connection of the proposed project to CHERP's mission and VA's priorities
  - **B.** VA Health System and/or Community Partner(s). Identify and describe the role of the VA health system and/or community partner(s) that are engaged in the project [include letter(s) of support from health system and community partner(s) in appendix].
  - **C.** Background and Preliminary Studies. Briefly describe the background leading to the present application, critically evaluate existing knowledge, and identify the gap(s) the project is intended to address.
    - The scientific rationale and theoretical framework for the project
    - Relevant research inside and outside VA
    - How or why this study will succeed in answering questions that have eluded other researchers (e.g., better design, larger sample, longer follow-up, etc.)
  - **D.** *Design and Methods*. Describe the project design and the procedures used to achieve the specific aims of the project.
    - Study population and sample
    - Data sources and measures. Indicate how the data will be collected and analyzed
    - Potential difficulties and limitation of the proposed procedures
    - Analysis plans
  - **E.** Veteran, Caregiver, and/or Provider Engagement. CHERP strongly encourages VA stakeholder input and engagement in the project. This includes a substantive effort to engage Veterans, caregivers, and/or health care providers in the development of the pilot proposal, and/or plans to engage stakeholders in the execution of the study and dissemination of study findings.
    - NOTE: If your study involves prospective recruitment, please describe your plans to report study findings back to study participants.
  - **F.** *Timeline and Plans Future Funding.* Describe the project timeline and plans for future funding. Present the timeline in Gantt chart format, including all stages of the project, from start-up, data collection, data analysis, dissemination, and application for future funding.
- 3. Literature Cited (no page limit)
- 4. **Budget and Budget Justification** (use Budget Table Template; see Appendix 1 for sample budget table and budget justification)
- 5. NIH Biographical Sketch for the Principal Investigator(s), Co-Investigators, Consultants, and/or Mentors
- 6. VA Health System and/or Community Partner(s) Letter(s) of Support
- 7. Project Mentor Letter of Support (if applicable)

## **GUIDELINES FOR SUBMISSION OF APPLICATION**

Applications are due on or before <u>May 15, 2019</u>. Incomplete applications or applications not prepared in accordance with the instructions will not be considered. Funding announcements will be made in July with the earliest start date of October 1, 2019, pending all necessary approvals and availability of funds.

#### SUBMISSION INFORMATION

An electronic copy of the completed application should be submitted as a **single PDF** to Kelly H. Burkitt, PhD at kelly.burkitt@va.gov.

#### **FURTHER INFORMATION**

Questions regarding the application process, funding priorities, investigator eligibility, collaboration with CHERP investigators, potential VA and community partners, and stakeholder engagement may be directed to CHERP Research Development Core Co-Directors, Kelly Burkitt, PhD (412-360-2202 or kelly.burkitt@va.gov) in Pittsburgh or Kimberly "Max" Brown, PhD (215-823-5800 x6248 or kimberly.brown6@va.gov) in Philadelphia.

#### **CHERP INFRASTRUCTURE CORES**

CHERP's six infrastructure cores are described below with contact information for each.

The *Biostatistics and Informatics Core (BIC)* provides scientific and technical expertise to guide investigators in developing research aims, hypotheses, and analysis plans for a wide range of projects (e.g., secondary data analyses, prospective studies, clinical trials), estimating sample sizes, and accessing VA and non-VA clinical and administrative data. Contact Scarlett Bellamy, PhD (<a href="mailto:slb458@drexel.edu">slb458@drexel.edu</a>) in Philadelphia or Mary Walsh (412-360-2256 or <a href="mailto:mary.walsh3@va.gov">mary.walsh3@va.gov</a>) in Pittsburgh.

The *Qualitative Methods Core* provides scientific consultation and technical assistance in qualitative and mixed methods research. Services provided by the core include: (1) assistance with development of research applications that employ qualitative or mixed methods; (2) development and pilot testing of interview guides; and (3) qualitative data collection, transcription, coding, and analysis. Contact Shimrit Keddem, PhD (215-823-5800 x5226 or <a href="mailto:shimrit.keddem@va.gov">shimrit.keddem@va.gov</a>) in Philadelphia or Keri Rodriguez, PhD (412-360-2149 or <a href="mailto:keri.rodriguez@va.gov">keri.rodriguez@va.gov</a>) in Pittsburgh.

The *Dissemination and Implementation Core* provides expertise in implementation science to help investigators incorporate implementation questions and methods into their proposals to support the translation of evidence-based research into practice and policy. Contact Matt Chinman, PhD (412-360-2438 or matthew.chinman@va.gov).

The *Communication Core* provides consultation and support for to ensure that CHERP pilot findings are effectively communicated to relevant audiences and stakeholders, including operational and community partners, key stakeholders, academic affiliates, and peer researchers. Contact Carson Clark (215-823-4159 or <a href="mailto:carson.clark@va.gov">carson.clark@va.gov</a>).

The *Research Development & Stakeholder Engagement Core* supports development and submission of all research proposals by CHERP investigators. In addition, this Core assists investigators in ensuring that their research is aligned with and responsive to stakeholder priorities by coordinating the work of our Veteran Community Advisory Boards and facilitating investigator access to the Board for input on research priorities, methods, data collection instruments, and dissemination of study findings. Contact Kimberly "Max" Brown, PhD (215-823-5800 x6248 or <a href="mailto:kimberly.brown6@va.gov">kimberly.brown6@va.gov</a>) or Kelly H. Burkitt, PhD (412-360-2202 or kelly.burkitt@va.gov).

The *Health Equity Capacity Building Core* serves as a resource to support the conduct and effective dissemination of high-impact health equity research by CHERP and other HSR&D investigators. The Core will assist CHERP pilot applicants with identifying and facilitating ways to address equity-related issues through primary, secondary, or subgroup analyses. Contact Melissa Dichter, PhD (215-823-5800 x3871 or <a href="melissa.dichter@va.gov">melissa.dichter@va.gov</a>) in Philadelphia or Leslie Hausmann, PhD (412-360-2112 or <a href="leslie.hausmann@va.gov">leslie.hausmann@va.gov</a>) in Pittsburgh.

# APPLICATION COVER PAGE CHERP COMPETITIVE PILOT PROJECT PROGRAM FISCAL YEAR 2020

Due Wednesday, May 15, 2019

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Project Title	Ente	Enter last name. Enter first n		first name.	name. Enter		Enter your degree(s).		
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Signature of Principal Ir	nvest	igator's Supervis	sor	Da	te				
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# **Budget Table Template\***

\*Please develop the budget in collaboration with CHERP.
Pittsburgh: Kimberly Hansen, MA (412-360-2219 or <a href="kimberly.hansen1@va.gov">kimberly.hansen1@va.gov</a>)
Philadelphia: Kimberly "Max" Brown, PhD (215-823-5800 x6248 or <a href="kimberly.brown6@va.gov">kimberly.brown6@va.gov</a>)

Personnel - Primary							
Site	Degree	Site	Role	%	FY20		
Subtotal Personnel							
Personnel - Other Site	Degree	Site	Role	%			
Subtotal Personnel							
Personnel - Other Site	Degree	Site	Role	%			
Subtotal Personnel							
TOTAL PERSONNEL							
Consultants							
Total Consultants							
Supplies							
Total Supplies							
All Other							
Total All Other							
Total Direct Costs							

# Appendix 1 Example: Summary Budget Table

Personnel - Primary						
Site	Degree	Site	Role	%	FY20	
Snow White	PhD	New Castle	Principal Investigator	15.0%	\$12,675	
Happy G. O'Lucky	MD	New Castle	Primary Mentor	5.0%		
Gru M. Pi	PhD	New Castle	Co-Investigator	2.5%	\$2,015	
Bosch Full	BS	New Castle	RA/Data Manager	5.0%	\$1,820	
TBN		New Castle	Project Director	10.0%	\$5,200	
Subtotal Personnel						
Personnel - Other Site	Degree	Site	Role	%		
Subtotal Personnel						
Personnel - Other Site	Degree	Site	Role	%		
Subtotal Personnel						
TOTAL PERSONNEL			<u>,                                      </u>		\$21,710	
Consultants						
Rogers Nelson					\$200	
Total Consultants						
Supplies						
Neuropsychological test materials						
Audio Recorders (1)						
Microphones (1)						
Total Supplies					\$550	
All Other						
IPA: Wilhelm Grimm					\$1,950	
Participant Payments					\$500	
Total All Other						
Total Direct Costs				\$2,450 \$24,910		

# Example: Budget Justification (adapted from HSR&D Website)

https://vaww.research.va.gov/funding/docs/ExampleBudgetJustification.pdf

**Primary Site: New Castle, ST** 

## Personnel

**Snow White, PhD**, Principal Investigator (1.8 cal mos, salary and fringe \$12,675), will oversee all aspects of the project. She will hire, train, and supervise all study personnel at the New Castle site and organize and lead the initial training for personnel at both study sites. She will provide oversight of all aspects of participant recruitment, enrollment and retention, intervention delivery, data collection, analysis and dissemination.

**Happy G. O'Luckee, MD**, Co-Investigator (0.6 cal mos, no salary requested), is a psychiatrist based at the MIRECC affiliated with the New Castle VA Medical Center, where she specializes in research on family interventions. She will assist Dr. White team in the creation and implementation of treatment strategies for adapting standard family communication training to accommodate emotion processing deficits.

**Gru M. Pi, PhD**, Co-Investigator, (0.3 cal mos, salary and fringe \$2,015), is a licensed Clinical Research Psychologist specializing in research on family interventions. He will refine the study intervention and participate in data analysis and reporting.

**Bosch Full, BS**, Research Assistant/Data Manager, (0.6 cal mos, salary and fringe \$1,825), will contact potential participants, screen them for eligibility, obtain informed consent, ensure baseline and follow up assessments are completed, and enter data into a secure database.

**Project Director, TBN** (1.2 cal mos, salary and fringe \$5,200), will work with the Research Assistant to oversee participant identification, recruitment and scheduling study assessments, maintain IRB approval and regulatory documents, ensure baseline and follow up assessments are completed and will oversee the maintenance of study records in a secure fashion.

## **Consultants:**

**Rogers Nelson, PhD** (\$200/yr). Dr Nelson is Professor of Psychology and Vice Provost of Research at Castle University and an expert on multifamily group treatment. Dr. Nelson will provide training to the Principal Investigator/Program Director Dr. White in Year 1, consultation/supervision to the study team as needed, and assist interpretation and dissemination of the study's findings. Dr. Nelson will also serve as a member of the Scientific Advisory Board and participate in quarterly, 90-minute calls.

# Supplies:

**Materials and Supplies** (\$550). Supplies include: neuropsychological test materials, 1 tape recorder, and 1 microphone to record therapy sessions.

# **Other Direct Costs:**

**IPA: Wilhelm Grimm, MSW** (non-VA, 0.3 cal mos, fringe and salary \$1,950). Herr Grimm is bilingual with a degree in social work and experienced in assessment of mood, anxiety and psychotic disorders, management of psychiatric emergencies, crisis intervention, family psychoeducation, and cognitive behavioral interventions. His ability to communicate with Veterans and family members in German is a particular asset in engaging and recruiting study participants. He requires minimal training in the study interventions, will provide treatment to 50% of participants at the primary site, and will participate in weekly supervision calls.

**Participant Payments** (\$500): Veterans will be offered a \$25 stipend for their participation in each assessment. Based on a planned enrollment of 20 Veterans, we estimate the following assessments costs per site: 20 assessments @ \$25 each = \$500